PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999 **CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN** TYPE [**SMALL ENTITY** (Column 2) OR (Column 1) NUMBER EXTRA NUMBER FILED FOR RATE FEE RATE FEE .35. 345.00 690.00 OR **BASIC FEE** minus 20= TOTAL CLAIMS X\$18= X\$ 9= OR minus 3 =INDEPENDENT CLAIMS X78= X39 =OR MULTIPLE DEPENDENT CLAIM PRESENT +260= +130= OR If the difference in column 1 is less than zero_enter "0" in column 2 TOTAL OR TOTAL CLAIMS AS AMENDED -**OTHER THAN SMALL ENTITY** SMALL ENTITY OR (Column 3) (Column 2) (Column 1) HIGHEST CLAIMS ADDI-ADDI-NUMBER PRESENT REMAINING ⋖ TIONAL TIONAL RATE **RATE AFTER** PREVIOUSLY **EXTRA AMENDMENT** FEE FEE PAID FOR **AMENDMENT** X\$18=Minus X\$9=Total OR = Independent Minus X78= X39= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM BEST AVAILABLE +260= +130= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 3) (Column 2) (Column 1) HIGHEST CLÄIMS ADDI-ADDI-NUMBER **PRESENT** REMAINING **TIONAL** TIONAL RATE **RATE** AFTER **PREVIOUSLY EXTRA AMENDMENT** FEE FEE PAID FOR AMENDMENT X\$18= Minus X\$ 9= Total OR = Minus Independent X78= X39 =OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +260= +130= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 3) (Column 2) HIGHEST CLAIMS ADDI-ADDI-NUMBER PRESENT REMAINING RATE TIONAL RATE TIONAL **PREVIOUSLY EXTRA AMENDMENT AFTER** FEE FEE PAID FOR **AMENDMENT** Minus Total X\$18=X\$ 9= OR Minus Independent X78= X39 =OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +260= +130= OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

OR

TOTAL

ADDIT. FEE

Application or Docket Number

TOTAL

ADDIT. FEE

This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION	NUMBER	:				
Total Fee Calculation						
	Fee Cade	Total # Claims	Number Ectro X	Fee	نىچەم ئىلىق	Total
	Sm./Lg			Sm. Entity	Lg Entity	
Busic Filmy Fee	201/101	•			1090	•
Total Claim; ≥20	201.101	204 :10	184 :		18	
Independent Claims > j	202/102	15	15 x		18	-
Multi Dep Claim Present	204.104					
Surcharge	205/103				130 .	
English Translation	139				/-	
TOTAL FEE CALCULA	TION					50108
Fees due upon filing th	e application					- .
Total Filing Fees Due =	= S	5068			~	
Less Filing Fees Submi	ned - 5			•		
BALANCE DUE	= 5	5068				
Office of Initial Patent É	xamination	_ .				